What is Claimed is:

1.   A software program implemented in a medical device system, comprising:

        means for detecting atrial capture;

        means for resetting an atrial chamber reset;

        means for instructing an atrial output circuitry in the medical device to emit atrial test pulses on a periodic basis; and

        means for determining a minimum magnitude of said atrial test pulse in cooperation with said means for detecting, said means for resetting and said means for instructing.

2.   The system of claim 1 wherein said means for resetting includes means for confirming atrial capture.

3.   The system of claim 2 wherein said means for confirming further includes means for identifying interruption of a stable sinus system.

4.   A software program implemented in a medical device system, comprising:

        means for adjusting energy levels of atrial test pulses within a high and low energy level until loss of atrial capture; and

        means for marking an interruption in a stable ventricular sensed rhythm to identify said loss of atrial capture wherein said means for adjusting cooperates with said means for restoring said AV synchrony.

5.   A software system implemented in a medical device system comprising:

        means for selecting between atrial chamber reset and atrial ventricular conduction;

        means for determining the most accurate measure of an atrial pacing threshold for any patient at any time; and

        means for determining patient's disease state, said means for determining being in operable data communication with said means for selecting and said means for determining.

6.   A system for measuring pacing thresholds in one or more leads associated with a medical device, the system comprising:

means for checking a polarity of a lead;

means for changing said polarity of the lead if said lead fails a test; and

means for initiating one of an adjustment of atrial and ventricular output based on results obtained via said means for checking and said means for changing.